

Form	990-T	Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))		OMB No. 1545-0687	
Department of the Treasury Internal Revenue Service		For calendar year 1997 or other tax year beginning _____, 1997, and ending _____, 19 ____ ▶ See separate instructions.			
				1997	
A <input type="checkbox"/> Check box if address changed		Please Print or Type	Name of organization		D Employer identification number (Employees' trust, see instructions for Block D on page 6.)
B Exempt under section <input type="checkbox"/> 501(c) () <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)			Number, street, and room or suite no. (If a P.O. box, see page 5 of instructions.)		
C Book value of all assets at end of year			City or town, state, and ZIP code		E Unrelated business activity codes (See instructions for Block E on page 6.)
F Group exemption number (see instructions for Block F on page 6) ▶					
G Check type of organization. ▶ <input type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> 408(a) trust <input type="checkbox"/> 220(d) trust					
H Describe the organization's primary unrelated business activity. ▶					
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? . . ▶ <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation. ▶					
J The books are in care of ▶ Telephone number ▶ ()					
Part I Unrelated Trade or Business Income			(A) Income		(B) Expenses
					(C) Net
1a Gross receipts or sales					
b Less returns and allowances					
c Balance ▶			1c		
2 Cost of goods sold (Schedule A, line 7)			2		
3 Gross profit (subtract line 2 from line 1c)			3		
4a Capital gain net income (attach Schedule D)			4a		
b Net gain (loss) (Form 4797, Part II, line 18) (attach Form 4797)			4b		
c Capital loss deduction for trusts			4c		
5 Income (loss) from partnerships (attach statement)			5		
6 Rent income (Schedule C)			6		
7 Unrelated debt-financed income (Schedule E)			7		
8 Interest, annuities, royalties, and rents from controlled organizations (see page 7 of instructions)			8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			9		
10 Exploited exempt activity income (Schedule I)			10		
11 Advertising income (Schedule J)			11		
12 Other income (see page 7 of the instructions—attach schedule)			12		
13 TOTAL (combine lines 3 through 12)			13		
Part II Deductions Not Taken Elsewhere (See page 8 of the instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)					
14 Compensation of officers, directors, and trustees (Schedule K)			14		
15 Salaries and wages			15		
16 Repairs and maintenance			16		
17 Bad debts			17		
18 Interest (attach schedule)			18		
19 Taxes and licenses			19		
20 Charitable contributions (see page 9 of the instructions for limitation rules)			20		
21 Depreciation (attach Form 4562)			21		
22 Less depreciation claimed on Schedule A and elsewhere on return			22a		22b
23 Depletion			23		
24 Contributions to deferred compensation plans			24		
25 Employee benefit programs			25		
26 Excess exempt expenses (Schedule I)			26		
27 Excess readership costs (Schedule J)			27		
28 Other deductions (attach schedule)			28		
29 Total deductions (add lines 14 through 28)			29		
30 Unrelated business taxable income before net operating loss deduction (subtract line 29 from line 13)			30		
31 Net operating loss deduction			31		
32 Unrelated business taxable income before specific deduction (subtract line 31 from line 30)			32		
33 Specific deduction			33		
34 Unrelated business taxable income (subtract line 33 from line 32). If line 33 is greater than line 32, enter the smaller of zero or line 32			34		
For Paperwork Reduction Act Notice, see instructions.					
				Cat. No. 11291J	
				Form 990-T (1997)	

Part III Tax Computation

35 Organizations Taxable as Corporations (see instructions for tax computation on page 10). Controlled group members (sections 1561 and 1563)—check here <input type="checkbox"/> . See instructions and:		
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ <input type="text"/> (2) \$ <input type="text"/> (3) \$ <input type="text"/>		
b Enter organization's share of: (1) additional 5% tax (not more than \$11,750) \$ <input type="text"/> (2) additional 3% tax (not more than \$100,000) \$ <input type="text"/>		
c Income tax on the amount on line 34	35c	
36 Trusts Taxable at Trust Rates (see instructions for tax computation on page 11) Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	36	
37 Proxy tax (see page 11 of the instructions)	37	
38 Total (add line 37 to line 35c or 36, whichever applies)	38	

Part IV Tax and Payments

39a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	39a	
b Other credits. (see page 12 of the instructions)	39b	
c General business credit—Check if from: <input type="checkbox"/> Form 3800 or <input type="checkbox"/> Form (specify) <input type="text"/>	39c	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	39d	
e Total credits (add lines 39a through 39d)	39e	
40 Subtract line 39e from line 38	40	
41 Recapture taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611	41	
42 Alternative minimum tax	42	
43 Total tax (add lines 40, 41, and 42)	43	
44 Payments: a 1996 overpayment credited to 1997	44a	
b 1997 estimated tax payments	44b	
c Tax deposited with Form 7004 or Form 2758	44c	
d Foreign organizations—Tax paid or withheld at source (see instructions)	44d	
e Backup withholding (see instructions)	44e	
f Other credits and payments (see instructions)	44f	
45 Total payments (add lines 44a through 44f)	45	
46 Estimated tax penalty (see page 3 of the instructions). Check <input type="checkbox"/> if Form 2220 is attached	46	
47 Tax due —If line 45 is less than the total of lines 43 and 46, enter amount owed	47	
48 Overpayment —If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48	
49 Enter the amount of line 48 you want: Credited to 1998 estimated tax <input type="text"/> Refunded <input type="text"/>	49	

Part V Statements Regarding Certain Activities and Other Information (See instructions on page 13.)

1 At any time during the 1997 calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," the organization may have to file Form TD F 90-22.1. If "Yes," enter the name of the foreign country here <input type="text"/>	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see page 13 of the instructions for other forms the organization may have to file.		
3 Enter the amount of tax-exempt interest received or accrued during the tax year <input type="text"/> \$		

SCHEDULE A—COST OF GOODS SOLD (See instructions on page 14.)Method of inventory valuation (specify)

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. (Enter here and on line 2, Part I.)	7	
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a Additional section 263A costs (attach schedule)	4a				
b Other costs (attach schedule)	4b				
5 Total —Add lines 1 through 4b	5				

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

<input type="text"/>	Date <input type="text"/>	Title <input type="text"/>
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Paid Preparer's Use Only

Preparer's signature <input type="text"/>	Date <input type="text"/>	Check if self-employed <input type="checkbox"/>	Preparer's social security number <input type="text"/>
Firm's name (or yours, if self-employed) and address <input type="text"/>	EIN <input type="text"/>	ZIP code <input type="text"/>	

SCHEDULE C—RENT INCOME (FROM REAL PROPERTY AND PERSONAL PROPERTY LEASED WITH REAL PROPERTY)

(See instructions on page 14.)

1 Description of property

(1)
(2)
(3)
(4)

2 Rent received or accrued		3 Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	Total	
Total income (Add totals of columns 2(a) and 2(b). Enter here and on line 6, column (A), Part I, page 1.) . . . ▶		Total deductions. Enter here and on line 6, column (B), Part I, page 1. . . ▶

SCHEDULE E—UNRELATED DEBT-FINANCED INCOME (See instructions on page 15.)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 × column 6)	8 Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals. ▶			Enter here and on line 7, column (A), Part I, page 1.	Enter here and on line 7, column (B), Part I, page 1.
Total dividends-received deductions included in column 8 ▶				

SCHEDULE F—INTEREST, ANNUITIES, ROYALTIES, AND RENTS FROM CONTROLLED ORGANIZATIONS

(See instructions on page 16.)

1 Name and address of controlled organization(s)		2 Gross income from controlled organization(s)	3 Deductions of controlling organization directly connected with column 2 income (attach schedule)	4 Exempt controlled organizations		
				(a) Unrelated business taxable income	(b) Taxable income computed as though not exempt under sec. 501(a), or the amount in col. (a), whichever is larger	(c) column (a) divided by column (b)
(1)						%
(2)						%
(3)						%
(4)						%
5 Nonexempt controlled organizations			6 Gross income reportable (column 2 × column 4(c) or column 5(c))	7 Allowable deductions (column 3 × column 4(c) or column 5(c))		
(a) Excess taxable income	(b) Taxable income, or amount in column (a), whichever is larger	(c) Column (a) divided by column (b)				
(1)		%				
(2)		%				
(3)		%				
(4)		%				
Totals. ▶			Enter here and include on line 8, column (A), Part I, page 1.	Enter here and include on line 8, column (B), Part I, page 1.		

SCHEDULE G—INVESTMENT INCOME OF A SECTION 501(c)(7), (9), OR (17) ORGANIZATION

(See instructions on page 16.)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals ▶	Enter here and on line 9, column (A), Part I, page 1.			Enter here and on line 9, column (B), Part I, page 1.

SCHEDULE I—EXPLOITED EXEMPT ACTIVITY INCOME, OTHER THAN ADVERTISING INCOME

(See instructions on page 16.)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Column totals ▶	Enter here and on line 10, col. (A), Part I, page 1.	Enter here and on line 10, col. (B), Part I, page 1.				Enter here and on line 26, Part II, page 1.

SCHEDULE J—ADVERTISING INCOME (See instructions on page 17.)**Part I Income From Periodicals Reported on a Consolidated Basis**

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Column totals (carry to Part II, line (5)) ▶						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

(1)						
(2)						
(3)						
(4)						
(5) Totals from Part I						
Column totals, Part II ▶	Enter here and on line 11, col. (A), Part I, page 1.	Enter here and on line 11, col. (B), Part I, page 1.				Enter here and on line 27, Part II, page 1.

SCHEDULE K—COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES (See instructions on page 17.)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
Total —Enter here and on line 14, Part II, page 1. ▶			

